

PTO/SB/51 (09-04)
Approved for use through 04/30/2007. OMB 0651-0033
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REISSUE APPLICATION DECLARATION BY THE INVENTOR	Docket Number (Optional)				
	CAS1.PAU.24.R2				
I hereby declare that: Each inventor's residence, mailing address and citizenship are stated below in the line of	the subject matter which is described and claimed				
the specification of which	•				
is attached hereto. was filed on 12/29/2000 as reissue application number.	per				
and was amended on December 29, 2000 ("Preliminary Amendment Submitted With Contact 2001 ("Substitute Preliminary Amendment" and the accompanying April 1, 2002 ("First Amendment") I have reviewed and understand the contents of the above-identified specifical amendment referred to above. I acknowledge the duty to disclose information which is material to patentability.	Substitute Reissue Specification); and ition, including the claims, as amended by any				
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), o equivalent) listing the foreign applications.	r 365(b). Attached is form PTO/SB/02B (or				
I verily believe the original patent to be wholly or partly inoperative or invalid, to below. (Check all boxes that apply.)	for the reasons described				
by reason of a defective specification or drawing.					
by reason of the patentee claiming more or less than he had the right to	claim in the patent.				
by reason of other errors.					
At least one error upon which reissue is based is described below. If the reissure reissue, such must be stated with an explanation as to the nature of the broad	ue is a broadening ening:				
The claims directed to a "hopper" are too narrow.					

[Page 1 of 2]
This collection of information is required by 37 CFR 1.175. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



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(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)					Docket Number (Optional) CAS1.PAU.24.R2			
All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant.								
Note: To appoint a power of attorney, use form PTO/SB/81.								
Correspondence Address: Direct all communications about the application to:								
The address a	s associated with Customer Number:							
OR .								
Firm or Individual Name	Myers Dawes Andras & Sherman LLP	LLP						
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Country	USA							
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.								
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Additional joint inventors	or legal representative(s) are named on separately r	numbered s	heets forms	PTO/SB/0	2A or 02LR at	tached l	hereto.	